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REISSUE APPLICATION DECLARATION BY THE INVENTOR	Docket Number (Optional) 2751.3000
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I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 6,258,988 B1, granted July 10, 2001 and for which a reissue patent is sought on the invention entitled Method for Reforming Organics into Shorter Chain Unsaturated Organic Compounds,

the specification of which

is attached hereto.

was filed on _____ as reissue application number _____
and was amended on _____.
(If applicable)

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/2B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

by reason of a defective specification or drawing.

by reason of the patentee claiming more or less than he had the right to claim in the patent.

by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

Patentee was entitled to claim apparatuses useful in the patented methods. Thus, patentee claimed less than he had the right to claim. As such, this broadening reissue claims such apparatuses.

[Page 1 of 2]

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)		Docket Number (Optional) 2751.3000																														
<p>All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Name(s)</td> <td style="width: 80%;">Registration Number</td> </tr> <tr> <td>Carolyn S. Elmore</td> <td>37,567</td> </tr> <tr> <td>Anne T. Craig</td> <td>32,976</td> </tr> </table>			Name(s)	Registration Number	Carolyn S. Elmore	37,567	Anne T. Craig	32,976																								
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Carolyn S. Elmore	37,567																															
Anne T. Craig	32,976																															
<p>Correspondence Address: Direct all communications about the application to:</p> <p><input type="checkbox"/> Customer Number: </p> <p>OR</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Firm or Individual Name</td> <td colspan="4">Elmore Craig, P.C.</td> </tr> <tr> <td>Address</td> <td colspan="4">209 Main Street</td> </tr> <tr> <td>Address</td> <td colspan="4"></td> </tr> <tr> <td>City</td> <td>Chelmsford</td> <td>State</td> <td>MA</td> <td>Zip 01863</td> </tr> <tr> <td>Country</td> <td colspan="4">USA</td> </tr> <tr> <td>Telephone</td> <td>(978) 251-3509</td> <td>Fax</td> <td colspan="2">(978) 251-3973</td> </tr> </table>			Firm or Individual Name	Elmore Craig, P.C.				Address	209 Main Street				Address					City	Chelmsford	State	MA	Zip 01863	Country	USA				Telephone	(978) 251-3509	Fax	(978) 251-3973	
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.</p>																																
<p>Full name of sole or first inventor (given name, family name)</p> <p><u>Christopher J. Nagel</u></p>																																
Inventor's signature	Date																															
Residence	Citizenship																															
Mailing Address																																
<p>Full name of second joint inventor (given name, family name)</p> <p><u>Thomas P. Griffin</u></p>																																
Inventor's signature	Date																															
Residence	Citizenship																															
Mailing Address																																
<p>Full name of third joint inventor (given name, family name)</p> <p><u>Thomas A. Kinney</u></p>																																
Inventor's signature	Date																															
Residence	Citizenship																															
Mailing Address																																

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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Kevin A.		Sparks	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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